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ABSTRACT

This study investigated the impact of homelessness on the health of parents and the health and education of their children living in East Lothian, Scotland, and was carried out over a 6-month period from December 1999. In-depth interviews were conducted with 19 parents and children who were currently experiencing or who had experienced homelessness. Interviews were also conducted with 22 representatives from relevant statutory and voluntary sector agencies. The findings revealed that homelessness often represented a culmination of several problems, such as financial debt and relationship difficulties. Experience of homeless accommodation varied, with temporary bed and breakfast accommodation especially associated with increased stress and isolation. The longer families spent in temporary accommodation the more negative they became about their homeless experiences. Most parent and professional interviewees recognized that homelessness could profoundly affect children's health and education. Parents highlighted a need for more written information and more frequent contact with housing officials. Professionals often stressed a need for more joint work between agencies; a number suggested that a greater emphasis should be placed in developing preventive and early intervention strategies focusing on the actual needs of families. (Three appendices include guidance for homeless applicants, information on parent, child, and professional informants, and a list of the steering group members.) (KB)

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The Impact of Homelessness on Families

Stuart Hall
Janet Powney
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The Impact of Homelessness on Families

Stuart Hall
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The Scottish Council for Research in Education

East Lothian Council

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Executive Summary

1.1 Introduction

This research was commissioned by East Lothian Council and Tranent Social Inclusion Partnership to investigate the impact of homelessness on the health of parents and the health and education of their children living in East Lothian. Additionally the research was also charged with making policy and practice recommendations. The study was carried out over a six month period from December 1999. An advisory committee was set up to oversee the progress of the project with representatives from East Lothian Council, Housing, Health, Social Work and Education services as well as the Tranent SIP. In-depth interviews were conducted with parents and children who were currently experiencing, or who had previously experienced, homelessness. Interviews were also conducted with representatives from relevant statutory and voluntary sector agencies.

1.2 Summary Findings

1.2.1 Family background and accommodation

The majority of interviewed parents were female, single and unemployed. Homelessness often represented a culmination of several problems, such as financial debt and relationship difficulties. For many, homelessness led to increased stress, depression, and isolation. For children it marked a time of change and uncertainty, sometimes associated with the loss of a parent and/or friends.

Experience of homeless accommodation varied, with temporary bed and breakfast accommodation coming in for particular criticism. Adults and children spoke of the increased stress and isolation experienced in such accommodation. However, local authority temporary accommodation also attracted some criticism often for being poorly matched to a families needs or for being in a poor state of repair. In general, the longer families spent in temporary accommodation the more negative they became about there homeless experiences.

1.2.2 Health and education

Most parent and professional interviewees recognised that homelessness could have a profound effects on children's health and education. In the most obvious cases accommodation was in such a poor state of repair that it was felt to directly and rapidly affect an individuals health, for example, damp accommodation often made respiratory conditions worse. In other instances the effects were perhaps more subtle or long term. Being accommodated in temporary bed and breakfast accommodation could lead to more exposure to tobacco smoke, experiencing a lack of study space, or facing sleepless nights as a result of rowdy neighbours. Professional interviewees demonstrated a degree of understanding about the health and educational impact of homelessness on families often raising similar points to those made by parents.

1.2.3 Improving the system

Parental interviewees highlighted a need for more written information and more frequent contact with housing officials. Professionals often stressed a need for more joint working between agencies, to share workload but also to develop understanding between agencies and capitalise on each others specialisms. In general it was agreed that there was some way to go in this respect. A number of professionals suggested that a greater emphasis was required in developing preventative and early intervention strategies which focussed on the actual needs of families.

1: Introduction

Parents and children who experience periods of homelessness or living in temporary accommodation can be among the most vulnerable in our society. Experiences associated with being homeless may impact on an individuals physical and mental well-being and for the child result in reduced educational performance and difficulties at school. The purpose of this research was to investigate the educational and health impacts of homelessness on children and their parents in such households and develop proposals to address these. The research was carried out by the Scottish Council for Research in Education (SCRE) between January and May 2000.

1.1 Aims

The aims of this research were to:

- contribute to the development of homeless and temporary accommodation in East Lothian
- contribute to the development of health services to homeless households
- ensure the educational needs of children within homeless households are addressed
- contribute to the allocation process in regard to homeless families.

1.2 Background to the research

This research was commissioned as a joint exercise between the Tranent SIP (Social Inclusion Partnership) and East Lothian Council's Housing Services Division. East Lothian has one of the highest levels of homelessness, per head of population, in Scotland with an average of 1000 applications from homeless households per year. A significant proportion of these are from families with dependent children.

Homelessness is a traumatic experience for anyone, regardless of who they are and whatever their personal circumstances. The impact on children, whose lives will be substantially disrupted, is likely to be considerable and could have long-term effects on health, self-confidence and learning. While a great deal of research has been carried out around the issue of homelessness amongst young people (eg Hutson and Liddiard, 1994; Carlen, 1996; MacDonald, 1997; van der Ploeg and Scholte, 1997; Blackman, 1997, 1998) considering such matters as social background, causes of homelessness and health and support needs, few studies (at least in this country) have looked at the impact homelessness has on children within households facing this kind of crisis. It has to be remembered also that the actual fact of being homeless is likely to be only one, albeit the most acute, of the problems the household is facing. Others might involve debt, family breakdown, domestic violence, harassment or a combination of them all – any of which will have their own effects on the child's sense of safety, security and general well-being. For the majority of those involved, homelessness has resulted from a complex set of circumstances over which the 'victims' have been able to exercise little control. This is particularly true of children.

Central to the question of how agencies should respond to this situation and what can be done to tackle the worst effects on the households concerned, is the issue of resources. Local Authorities have a statutory duty to assess the needs of people presenting themselves as homeless and, where it is found the household is in priority need, is not 'intentionally' homeless and has a local connection, the obligation is to secure permanent re-housing. In the meantime the applicants must be provided with temporary accommodation. East Lothian tries to be as flexible as possible in its approach within the bounds of the legislation and available resources. (Guidance provided by East Lothian Council for those who are, or who are likely to be, homeless is described in Appendix 1).

East Lothian Council currently manages approximately 30 units of temporary accommodation in the form of mainstream housing stock. In addition it has access to seven bed and breakfast establishments in Tranent, Haddington, Dunbar and Musselburgh. As a matter of policy the Council aims to avoid using bed and breakfast accommodation for families with young children or the more vulnerable groups of single applicants such as 16/17 year-olds. In practice this is difficult given the high number of homeless applicants who require temporary accommodation together with the low turnover of vacancies for permanent housing. Homeless people represent only one section of a waiting list which contains over 5000 applicants while only about 450-500 vacancies become available each year. Housing Associations provide accommodation to people from the Council's list through local agreements (nominations), but Housing Association stock is limited and they have their own waiting lists to manage as well.

As a result, homeless applicants awaiting re-housing can stay for periods of up to a year or more in temporary provision (including staying with relatives) before moving on to permanent accommodation. Spaces are therefore not available for new applicants approaching the Housing Department for assistance. The result is a higher dependence on bed and breakfast accommodation which is not appropriate for families for a number of reasons: cramped living space, no privacy, no cooking facilities, no space for play or homework or quiet activity (reading/studying), higher risk of accidents, stress, noise and disturbance from other residents all combine to make life difficult and fraught. In order to alleviate as many of these problems as possible, the Council operates a system of standards involving regular inspections of the properties and surveys of users' views. However, these can only be palliative measures which attempt to make the accommodation more bearable, and do not address the problem at its root – the use of such accommodation in the first place.

1.2.1 The policy context

Over the last 18 months, East Lothian Council has been carrying out a major review of its Homelessness Policy. This has led to the development of a strategy through which the recommendations from the review will be implemented along with a policy document setting out the aims and objectives of the service. Homelessness assessment, supported accommodation and

housing advice have been brought together under a new management structure to better co-ordinate these functions, and a Homeless Planning Group, with representatives from the voluntary sector along with other key external agencies, has been established to oversee the implementation of the strategy.

A major objective of the new strategy is to phase out altogether the use of bed and breakfast accommodation for homeless people replacing it with high standard self-contained temporary housing providing families with as near 'normal' living circumstances as possible. For this purpose the Council has successfully applied to the Scottish Executive for funding to enable the acquisition of land on which to build new purpose built accommodation in partnership with the Homes for Life Housing Partnership. This will go a long way to addressing many of the issues raised in this report. However, it will not totally resolve the problems of dislocation and disruption which homelessness has on people's lives, particularly in the case of young children.

This research was commissioned to assist the housing service to re-examine its practice, particularly in relation to closer collaboration with other services which come into contact, knowingly or otherwise, with homeless people. On becoming homeless, families may well move away from the areas they were living in. Contacts with local health services and schools might be lost or interrupted. This can be particularly difficult for children who lose touch with friends and teachers and have to go through the process of establishing new relationships elsewhere. Teachers, not aware of the family circumstances, will not be able to make allowances for the difficulties associated with insecure or temporary accommodation, while the children themselves can be ostracised or stigmatised if their peers find out about them living in a homeless 'hostel'. Important medical contacts can also be lost, as well as the effects that being homeless can have on a child's health and well-being.

The process of carrying out the research has already been useful in bringing representatives from various services together in the research steering group. Convened by a representative from the Homelessness and Supported Accommodation Section, others on the group come from community housing services, social work, education and community services, primary health care, and health promotion, as well as the Tranent Social Inclusion Partnership. (See Appendix 3 for list of steering group members). The SIP has provided the focus for the study in that, in common with the other larger settlements of East Lothian, significant applications for assistance come from the wider Tranent area. In addition one of the larger establishments providing bed and breakfast accommodation is located in the town. Within the SIP other projects concerned with young people and housing, health and education are being carried out. It is felt there will be a useful overlap among these projects, giving a broader perspective on the issues themselves, as well as contributing to the further development of services in the area. The findings and recommendations from the research will directly contribute to the homelessness strategy and provide a focus for improved collaboration between those services which deal with homeless children and their families. This will enable the development of

practical proposals aimed at reducing the more negative aspects of living in a property which is not a home and improving those vital links between services which can address the trauma of being homeless.

1.3 Research programme

The initial focus of this research was the experience of homeless families with children. The researchers were then able to draw on issues from these case studies in interviews with workers from voluntary and professional agencies.

1.3.1 Families

The number of families in homeless accommodation in East Lothian at the time of the study was high in comparison with other Scottish local authorities. However, in research terms the numbers are relatively small. Given the complex nature of the issues involved, it was decided to adopt a qualitative approach conducting face-to-face in-depth interviews with parents and children who had recently experienced or were currently homelessness. Interviews were conducted using a schedule which in addition to gathering background information about the family explored the following areas:

- routes to homelessness
- satisfaction with past and present housing
- effects of homelessness on parents' and children's health
- effects of homelessness on children's education
- overcoming problems
- experiences of different agencies
- improving the system.

1.3.2 Supportive agencies

Telephone interviews were conducted with representatives of educational, welfare, health and voluntary services working in the area. In addition to gathering general background information about the informant and the nature of their employment the schedule sought specific information on the following areas:

- informants' experiences of homelessness and the homeless
- key health and education issues with regard to homelessness
- suggestions for improving current services
- identified strengths and weaknesses of interagency working.

1.4 Operationalising the research

1.4.1 Families

The original intention of the research was to interview a total of 50 parents and children who had experienced homelessness. It was envisaged that the sample would include: families who were currently experiencing homelessness, families who had moved on into more permanent accommodation, families from different geographical locations, families in different types of accommodation, and

families with different socio-demographic profiles. To this end the housing section contacted almost 90 families in East Lothian and invited them take part in the research. Interviews took place either in the local housing office (regarded as a neutral venue by the researchers) or in the families' present accommodation. The initial response to this exercise was poor and only a handful of families agreed to be interviewed. Moreover, several individuals who had initially agreed to take part in the research did not appear for interview.

An attempt was then made by the housing section to re-contact families who failed to respond to the initial enquiry. As part of this follow-up exercise it was decided to offer a small financial incentive to families taking part in the research. This proved more successful and an additional number of families agreed to take part in the research. In total 17 families took part, providing interviews with 19 adults and eight children (see Appendix 2, Tables 1 and 2 for details of respondents). The net result was that the experiences of 31 children were included in the research. Whilst this number falls short of the initial numbers sought it can be seen from Table 1 that the research did establish contact with families from a range of backgrounds, with experience of different housing types and in different locations.

Whilst it cannot be argued that these respondents necessarily comprise a representative sample of those experiencing homelessness in East Lothian, the exercise did yield a substantial amount of case study material. Moreover a number of themes relating to the effects of homelessness on children's education and health emerged from these interviews with such consistency that we are confident of their relevance to the wider homeless family population in East Lothian.

1.4.2 Professionals

Interviews were conducted with 22 professionals representing a variety of services, both statutory and voluntary (see Appendix 2, Table 3 for details). Informants were selected in two ways:

- from information given by parent informants (during interviews)
- from suggestions made by members of the research steering group.

Interviews were conducted by telephone except in one instance where the informant requested a schedule be posted to her for completion. The majority of approaches by members of the research team to potential informants were met with a willingness to participate. However, none of the attempts made to interview GPs in the East Lothian area were successful.

1.4.3 Case studies

This report includes four case studies to illustrate how families had become homelessness, their experiences to date and effects on members of the family.

CASE STUDY 1

Background

This interview was conducted with a mother of two children aged four and seven. The family had become homeless as a result of marital break-up and had subsequently experienced four house moves in the previous seven months. She had applied for help as homeless but eventually moved into private rented accommodation.

Present accommodation and situation

The family were presently living in private rented accommodation with which the mother expressed great satisfaction:

> *Brilliant! It's a two bedroom house, we have our own front and back garden with a view.*

However she drew attention to the fact that the rent was high enough to deter her from seeking employment:

> *The rent is too expensive. I want to work but can't afford the rent. If I had a council house I would be able to go out and work.*

Impact of homelessness on education and health

The mother spoke of adjustment difficulties experienced by her youngest boy, saying that he missed his friends and had felt insecure due to the disruption to the family. However, she also stated that her older boy had been coping well and had actually formed many new friendships. She indicated that she had spoken with the eldest boy's school teacher who had expressed the view that he was a confident young man. The mother felt that neither of the boys had been affected in terms of general well-being by the disruption.

However, she reported having been tired herself and stressed by the period but had said that having a supportive family had provided help and reduced her burden.

Support

The family had originally been in a neighbouring local authority area which has a different allocations policy to East Lothian. Her experience of the housing officer in the former authority had not been satisfactory:

> *The housing officer let us down. I gave them six months notice that we were going to be homeless and we were told to come back then. When we did become homeless we were offered unacceptable temporary accommodation. A friend offered to house us temporarily but we were told by the council that if we moved in with this friend we would no longer be classed as homeless.*

Her experience of a housing officer in East Lothian was substantially more positive:

> *She [the housing officer] gave us the option of staying in a B&B for three months or staying with friend/family for three months and still being classed as homeless. She also offered to look for privately rented accommodation for us.*

Suggested improvements

The mother suggested that developing a service with one point of contact would be helpful to others in her position.

> *I found the system very erratic as there was no one person/point of contact. Consequently I felt like I was out there in the wilderness. There needs to be one person/point of contact, a single contact, that can point you in the right direction - like a guardian angel.*

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2: Research Findings—Families

2.1 Profile of family informants

Families interviewed in this project were living in a variety of rural and urban locations throughout East Lothian and in a range of housing types. These included bed and breakfast accommodation, local authority temporary units, and privately rented accommodation. Nine of the families were classified as homeless at the time of interview while the remainder were no longer regarded as such, having secured either privately rented accommodation, local authority or housing association tenancy (see Appendix 2, Table 2 for full details).

Seventeen interviews were carried out with 19 parents (in two instances a male/female couple were interviewed.) The remaining sixteen interviewees (classified themselves as single, separated or divorced) were female and three were male. Almost all (15) of the adults were effectively single parents. Adult interviewees ranged in age from 17 to 48 years with an average age of 33. The majority (13) were unemployed. The fact that so many of our homeless interviewees were unemployed single female parents is important to bear in mind given the fact that this group is regarded as economically and socially vulnerable and reflect the predominance of single mothers with children who have become homeless.

Five interviews were carried out with eight children. In one interview three children (siblings) took part and in another interview two children (siblings) participated. Five of the children were boys and three were girls; they ranged in age from eight to fifteen years with an average age of eleven. No attempts were made to interview children under the age of five.

2.2 Nature and extent of problems

It was apparent from many of the interviews that homelessness was not the original problem experienced but could be viewed as a crisis point arising from other difficulties such as the relationship with a partner and finances (see case study 2). Many of the interviewees spoke of situations where getting into financial difficulties placed pressure on their relationships and led to them being declared homeless. In a few cases, interviewees highlighted the insecurity of private rented accommodation where they can be forced to leave at relatively short notice if, for example, the landlord decides to sell the property. It was also apparent that relationship or financial difficulties do not automatically recede when families are rehoused. Indeed in some instances rehousing can prolong financial difficulties. This will be discussed in more detail later.

2.2.1 Isolation

Given that almost all interviewees were effectively single parents there was also the added problem of isolation to cope with. Indeed in several situations interviewees in bed and breakfast said that they were not allowed to bring friends and relatives into their accommodation which exacerbated their feelings

of isolation. For other families being accommodated in an unfamiliar area increased their isolation. In one or two instances parents spoke of their children being unable to see their friends because they were now outwith the area. In a few cases isolation also appeared to increase a family's feeling of being stigmatised as a result of being declared homeless. This was particularly the case with children and their families in bed and breakfast accommodation: this will be discussed further.

One mother, who had moved of her own accord into private rented accommodation in a small rural village, spoke of the difficulty in travelling from her current accommodation:

> *The location is a bit isolated although there is a bus once an hour but you have to go via Haddington to get any anywhere.*
>
> (26 year old single mother)

Clearly living in such isolated communities involves additional costs, potentially a serious burden for such families and one which can increase a family's isolation if they are unable to travel very often.

Children also spoke about losing friends as a result of moving to new accommodation. Among many of the children there was a feeling of resilience with some saying that they had made new friends since moving to another area. However, in one instance where a mother reported moving nine times in as many years she said that her daughter had become withdrawn and did not make friends readily:

> *Since we moved here she cries every morning, I think she is scared to settle in case she has to move.*
>
> (26 year old single mother)

The child herself explained to a researcher that she kept her toys in boxes so that they would be ready for the next move.

Going to a new school can be an uncertain time for children. Although East Lothian social work and education departments now jointly fund a transport scheme designed to keep children at the same school, this has only recently been implemented. In any case such a scheme is unlikely to accommodate children who have moved from other local authority areas and/or travelled considerable distances. A few of the children reported having to move school as a result of becoming homeless. The experience was not always negative: for one child the move to a new school meant escaping the bullies who had plagued her in her old school. In another case a boy had been able to remain at the same school despite moving to other accommodation but had discovered he was now too far away for his existing friends to visit.

Children were also felt to suffer additionally from experiencing temporary bed and breakfast accommodation in that they were unlikely to have a safe indoor play area. Indeed several parents spoke about the strain that built up in relationships with their children if they were unable to let them play freely in and around their temporary accommodation.

In a few cases adult interviewees underlined their isolation by pointing out that taking part in the interview had given them both an opportunity for adult contact and had allowed them to talk through some of their, often traumatic, experiences. Indeed one of the major observations emerging from conducting the interviews was the sense of isolation experienced by parents.

2.2.2 Depression

A number of the interviewees spoke of being depressed. Often this depression had been associated with the break-up of a previous relationship or facing financial difficulties. It was also clear that having negative experiences during their period of homelessness added considerably to some individual's depression. Some interviewees reported either presently being on anti-depressants or having taken them for a time during their period of homelessness. One interviewee reported that her mood had become so depressed that she had tried to commit suicide only to be saved by her son (see case study 2). In another situation a mother spoke of the palliative role played by her son:

> *My son helped to keep me sane. He was a positive influence, a ray of sunshine and helped pick me up.*
>
> (36 year old single mother)

Both of these examples raise issues concerning the impact of parental depression on children. Children who experience such situations may be unaware of the impact it is having on them and or where could they go for help.

2.2.3 Getting through the system

Families who indicated being 'in the system' for a short period of time were much more likely to make positive comments regarding their experiences. In one situation a family who had been declared homeless managed to remain in their previous home long enough to be rehoused in permanent local authority accommodation without having to go into temporary accommodation. As the mother said:

> *I was still living in our house when the council offered me this house. We went straight into a council house. We were lucky and avoided going into bed and breakfast accommodation...I am really happy with the house and all its facilities.*
>
> (36 year old single mother)

However, most of the interviewed families were less fortunate, many had spent time in temporary or private rented accommodation or both. In some cases families had been waiting some time for suitable accommodation to appear. Given that temporary and/or bed and breakfast accommodation can add to the stresses and uncertainties experienced by homeless families it was no surprise to find that, in general, the longer they spent waiting for suitable accommodation to appear the more critical of 'the system' families were likely to be. Lack of certainty about the likely length of time that they may be in temporary accommodation was a major concern among homeless families.

➤ Summary points

For adults homelessness is associated with:

- debt, depression, unemployment, feeling of degradation, additional responsibility of being a single parent, stress, isolation, feeling of life being 'on hold'.

For children homelessness is associated with:

- loss of a parent, no space to play, losing contact with existing friends and having to make new ones, lack of school support, being trapped in trouble, worried about parents.

2.3 Assessment of service gaps and problems

People now in permanent local authority or housing association accommodation were more appreciative of services and these interviewees generally praised the support of the homelessness officers. Some of those still in temporary accommodation also reported individual homelessness officers as very sympathetic.

2.3.1 Keeping families in poverty

A number of interviewees spoke about how the system of providing temporary accommodation perpetuated existing problems. For example, a few respondents, in temporary rented accommodation, suggested that they were unable to take up employment since the subsequent loss of housing benefit would mean the rent for such temporary accommodation would be too high.

For others who had moved into private rented accommodation to overcome homelessness, it was clear that such a move was only possible because they were registered unemployed and qualified for housing benefit. However, to remain in such accommodation meant that future employment was usually not a viable option. As one single mother in private rented accommodation stated:

> *The rent is too expensive. I want to work but can't afford the rent. If I had a council house I would be able to go out and work.*
>
> (32 year old single mother)

The net result of this situation is that some families are effectively prevented from becoming economically active or able to tackle debt repayment on a serious scale. While the housing division is not directly responsible for people's decision to move into private rented accommodation it is clear that a lack of affordable council and housing association accommodation, uncertainty over length of stay in, or suitability of, temporary accommodation may well encourage families to make such a move if the availability presents itself.

2.3.2 Communication

Many interviewees made comments regarding communication, both between themselves and professionals and less commonly between professional groups.

In relation to the housing division a number of interviewees indicated a degree of confusion concerning the housing allocations procedure, how points were awarded and for what:

> *I don't understand why it is those people with drugs problems should get preferential treatment.....Those with babies also get rehoused first....surely it is those with toddlers who need the space to run around.*
>
> (28 year old single mother)

For those families in temporary accommodation there was a major concern with their lack of knowledge and information on how long they would remain in their present situation. Many of these clients believed that they would have to wait some considerable time to be rehoused but hoped for imminent change.

Several informants developed this issue to request that the housing division maintain regular contact with them, both to report on progress in securing accommodation but also to reduce the isolation that many of them were experiencing. Certainly feedback on homelessness officers was generally positive and many clients clearly appreciate the contact they have with them:

> *The homelessness officer was very good. She really supported me. I phoned her a lot and she kept my spirits up. She talked to my lawyer and to the building society which reduced the stress on me. I have kept in touch with her since I got the house.*
>
> (36 year old single mum)

While this comment reflects satisfaction on the part of the client with the homelessness officer, it is clear that much of the contact was initiated by the client. Other interviewees made similar points:

> *The housing department were very helpful but you had to chase them up. However once contacted they were very helpful.*
>
> (35 year old single mother)

Interviewees suggested that there was, on occasion, a perceived lack of knowledge among professionals and voluntary services about how other agencies and services operated. In a few cases interviewees thought they had been given conflicting information from different agencies. Such instances do little to promote the public image of those who should be well informed about homeless issues. Similar observations were made by professionals and are reported in Chapter 3.

A few interviewees who had experienced private rented accommodation raised specific concerns regarding the payment of housing benefit. They were critical of the rent payment system, which they argued took an inordinate amount of time to process and was often responsible for souring the relationship between landlord and client family. For example, one interviewee reported living in fear of physical violence from his landlord since the relevant authorities had taken such a long time to pay his rent. In another instance a 26 year old single mother reported that a history of bureaucratic blunders had led to delays in rent payment:

I've seen them so many times [the benefits agency] but there is always new problems. I get a lot of contradictory statements from them. They are always losing my documents. ...When it is their word against yours they always win.

Several interviewees, who had experienced such a situation, directed their criticism at East Lothian housing section rather than at the local authority housing benefit section who are responsible for assessing eligibility for housing benefit and subsequent payments. While the housing section may not be responsible for housing benefit the confusion among some clients about who is responsible is an issue needing to be addressed. Moreover, it should be borne in mind that the delay in the payment of housing benefit is likely to increase the stress on families, a situation which may require interventions from other relevant agencies.

➤ Summary points

Interviewees suggested that:

- private rented and temporary accommodation may compromise families' efforts to extricate themselves from debt
- the allocation system is not clear.

2.4 Problems associated with different kinds of accommodation

It was clear that different types of accommodation were associated with different problems and experiences faced by families.

2.4.1 Privately rented accommodation

The quality of private rented accommodation appeared to vary, some clients regarded their accommodation as poor while others felt it was acceptable:

The place is fine, the heating is broken at the moment but we have no real problems.

(26 year old single mother)

It is a nice flat but I only have a wee box room for the baby. Noisy neighbours particularly late at night who usually wake up baby by shouting and arguing.

(17 year old single mother)

The kids were petrified staying in the area as it was very run down and there were lots of drug dealers living close by.

(29 year old single mother)

While the local authority has no role in allocating private rented accommodation to homeless families, the lack of suitable local authority accommodation and uncertainty over waiting times may lead some families into accepting such accommodation. However, in terms of developing and implementing an inclusive socio-economic strategy the council has to accept that the reliance on such accommodation by certain sections of the populace will effectively prevent

them from seeking employment and virtually ensure their continued reliance on state benefit. Several of the interviewees raised this as an issue:

> *We moved into private rented accommodation but couldn't afford it as I was only working part-time at the time and had to repay a bank loan.*
>
> (29 year old single mother)

Uncertainty concerning security of tenure was also raised as a problem by several interviewees who reported having to leave privately rented accommodation at short notice, either because the landlord had decided to sell the property or, as in two cases, the landlord had died and their son or daughter decided to develop the building in other ways.

2.4.2 Bed and Breakfast

Much of the criticism raised in relation to accommodation was directed at bed and breakfast. Moving to bed and breakfast was, for several interviewees, a major concern and a number of key issues were raised.

As already discussed bed and breakfast was seen to contribute to a family's isolation since they generally do not permit visits from friends and relatives. A number of interviewees spoke of having to arrange to meet people at outside venues or go to relatives' houses.

Issues were also raised by a few interviewees concerning the social mix of bed and breakfast residents:

> *Some of the residents have drug related problems... There are a lot of disturbances at night in the B&B from other residents, which also makes sleeping difficult.*
>
> (48 year old single mother)

> *[There are] drugs and drug utensils all over the place, I worry about what the kids will see or hear, [I] don't want them to play with some of the other children because of their drugs backgrounds.*
>
> (28 year old single mother)

In general interviewees gave the impression that much bed and breakfast accommodation is of poor quality. Often comments were made concerning the cleanliness and hygiene of establishments:

> *We moved into B&B in Musselburgh. [We were] there for four and a half months. This was a family home and the people were very nice but the place was filthy. We moved into one big room and tried to clean it up as best as possible. We didn't use the kitchen as it was so bad.*
>
> (45 year old single mother)

> *There is a table in the kitchen where they [children] can eat but I always take them back to the room as the kitchen is so unhygienic.*
>
> (28 year old single mother)

In other instances comments reflected the poor state of repair of some provision:

> *[We] were moved into a B&B hotel but didn't stay very long as the place was very damp, water was running down the walls and some of the fixtures were broken... One morning we found the bathroom covered in blood... we left the place and went back to stay with my parents.*
>
> (22 year old father)

Irrespective of the actual quality of provision, some interviewees felt that particular establishments were intrinsically unsuitable for families with children. Hotel bed and breakfast accommodation came in for such criticism since they were likely to be licenced and it was felt that such environments were unsuitable for children.

Many of those who had experienced bed and breakfast accommodation indicated that they often felt overcrowded while others spoke about the lack of facilities available to them:

> *[We] had only one room for self and son. Had a shared bathroom and no cooking facilities. Tried the breakfast but it was disgusting. Bought own toaster and my mother bought us a microwave.*
>
> (43 year old single mother)

> *Since you were sharing cooking facilities you tended to cook things that were convenient, it wasn't always the best food.*
>
> (35 year old single mother)

> *We [mother and 2 sons] shared one room which had a double and 3 single beds. We received our breakfast in the morning and then we were left to fend for ourselves. There were no cooking or washing facilities. Fortunately my mum stayed local so I could feed the kids properly there.*
>
> (29 year old single mother)

With space at a premium it is no surprise to find that several interviewees spoke about a lack of personal or family privacy:

> *I am sleeping with my son who is going through puberty and who really should have his own room... we are living on top of one another.*
>
> (48 year old single mother)

One or two respondents reported having to dispose of furniture or other possessions prior to moving into temporary bed and breakfast. A child also mentioned not being able to take the family pets when he moved into bed and breakfast. In one instance a family who had been in bed and breakfast for a few months before moving on to more permanent accommodation spoke of having to start from scratch with furnishing their new home since they had disposed of furniture a few months earlier.

2.4.3 Local authority temporary accommodation

Several respondents were either staying in local authority temporary accommodation or had previous experience of such. Experience of temporary accommodation varied. For one family the unit was too small and was unsuitable for children:

> *Half of our furniture is still in storage. The boys only have beds in their rooms. There is not enough space for them to play in their rooms so they need to play in the hall or the living room. There is no garden for the children to play in, the house is on the main street and is very noisy.*
>
> (32 year old single mother)

For another family the opposite was true, in that the house was felt to be too large:

> *The house was OK, but really at the end of the day it was too big for us [mother and baby girl], it was a huge three bedroom unfurnished flat.*
>
> (21 year old single mother)

Although the housing department attempts, wherever possible, to match the needs of families to the available housing stock it is likely that the demand for housing is so great that situations akin to those above are probably fairly common. One parent spoke about being housed in an area with which she was unfamiliar and which she regarded as less desirable. Again such examples are likely to be indicative of the lack of suitable local temporary accommodation units.

There was also some evidence to suggest that the state of repair of temporary accommodation units varies. As one interviewee reported:

> *We couldn't use the cooker or heating [in need of repair]. The council said it wasn't an emergency. We also had trouble getting the washing machine fitted. The flat was also unclean with dirty carpets littered with fag burns.*
>
> (21 year old single mother)

Another family's experience appeared more positive:

> *It [the temporary unit] is better than I thought it would be. I am happy that the children have space to run around and that we now have central heating which we didn't have in the last place.*
>
> (24 year old single mother)

In relation to families moving out of temporary unit accommodation, one interviewee pointed out that while they were keen to stay in the area of their temporary accommodation they had subsequently been offered a house in another less desirable area. In another instance an interviewee hoped that she would be moved to another area since she had concerns about drug use in the neighbourhood in which she and her family were presently housed. What these two examples highlight is the perceived lack of control and choice available to homeless families as they seek more permanent accommodation.

2.4.4 Housing Association accommodation

Only one family who took part in the survey had experience of housing association accommodation. As such it is difficult to draw any real conclusions regarding this type of accommodation. However, this unemployed married couple, reported that the accommodation was in a particularly good state of repair having been recently refurbished:

> *[It was] great, the house was perfect when we moved in, everything worked, it was decorated and there were new carpets.*
>
> (Married couple late 30s)

Moreover they felt that the rent was both affordable and reasonable and that they were fortunate in that the house was located next to the school that their child was attending.

2.4.5 Local authority permanent accommodation

Many respondents who had or who were experiencing homelessness aspired to permanent local authority housing. This was generally on the grounds of security of tenure and affordability. For those who had moved on into such accommodation their experiences were mixed:

It is very good, ideal for the two of us [father and son]. It is in a nice situation. I have landed on my feet. Two bedrooms, a kitchen, bathroom, nice living room, ideal. It was all decorated before we moved in.

(40 year old single father)

I am really happy with the house and all its facilities. We are having the central heating changed since my son has asthma and appears allergic to the solid fuel dust. The housing department have been really helpful with this.

(36 year old single mother)

This is a three apartment. It was a dump when we moved in. I'm getting it into shape now. I really like where we are. Probably would have liked another room so the girls could have had a room each.

(45 year old single mother)

Originally found it horrible; the interior was horrendous and there were piles of rubbish. It was so damp and there were no plaster on the walls. There were no lights on the stairs which was dangerous. The housing inspector did nothing to help. I had no choice and it took seven weeks to get it into a liveable state.

(43 year old single mother)

As with the allocation of temporary units, there was some indication that permanent local authority housing could not always be matched to the actual needs of families. For example a few respondents reported taking up accommodation that was either smaller than what they felt they needed or was located in an area that they were less happy with. Again much of the explanation here is rooted in the allocations procedures where clients often feel they have little choice but to accept offered accommodation.

➤ Summary points

Privately rented accommodation is:

- characterised by variation in quality, high rents and insecurity of tenure.

Bed and breakfast accommodation is:

- characterised by lack of living space, poor facilities, poor social mix and family isolation.

Local Authority temporary unit accommodation is:

- characterised by variation in quality and state of repair, perceived mismatch with family needs.

Permanent local authority tenancy is:

- characterised by variation in quality and state of repair, mismatch with family needs. Affordable.

2.5 Effects on children's health and education

From our interviews with parents and children it was apparent that homelessness could affect children's health and education in different ways.

These effects could manifest themselves fairly quickly or take some time to develop. Indeed it is likely that the effects of homelessness on children may develop over a longer time scale than the present research could uncover.

2.5.1 Children's education and health

The effects of homelessness on children's wellbeing and education is a complex picture which is difficult to disentangle. Indeed there are many factors which potentially impinge on the effects of homelessness. Interviewed parents highlighted factors such as the age of the child, the nature of temporary accommodation, and their own mental health as factors which could amplify or reduce the effects of homelessness on children's health and education.

Parents of younger children suggested that very young children and babies could be relatively unaffected by homelessness. However, while a child may be less aware of their physical environment, there may be other changes associated with being homeless which affect them. As already discussed, parents in bed and breakfast accommodation pointed out that they were unable to cook good quality healthy food, and often reported their fellow residents as being noisy. Indeed several informants were concerned with fellow residents smoking in communal areas. Clearly very young children can be exposed to a range of influences which may affect their later health and development. Many interviewees reported the experience of being homeless or living in temporary accommodation as stressful. It is not unreasonable to suggest that such stress could affect the relationship between a parent and even the youngest child. For example one female parent admitted that as a result of becoming homeless she had become more short tempered with her children.

While it may be the case that the effects of being homeless on young children is less obvious, with older children parents were better able to see changes which indicated health and educational impacts. Indeed parents indicated a whole range of health and educational effects stemming from their experience of being homeless. The following examples are typical:

> *My youngest son [aged 4] was frightened and he slept with me. Oldest son [aged 8] went through a rebellious phase.*
>
> (32 year old single mother)

> *David [aged 4] resents the fact that he has been moved around and his temper is more fiery.*
>
> (32 year old single mother)

> *Oldest girl [aged 11] felt degraded and embarrassed at having to stay in a B&B. Living in one room with no money and friends not able to visit led to a lot of tension and resentment from child.*
>
> (45 year old single mother)

> *He [12 year old] started bedwetting which he had never done before... also his asthma got worse.*
>
> (40 year old single father)

> *When we moved I felt he [3 year old] regressed a bit, baby babbling and temper tantrums increased... At first he wouldn't play on his own in his own room but now he is fine.*
>
> (36 year old single mother)

My son [aged 12] is well behind at school. There is no room in the B&B for him to study. It is too noisy in the common room. He can't do his homework, and I don't know enough to help him. He has been bullied several times... he has lost a lot of friends.

(48 year old single mother)

There was also some indication that children were resilient and coped remarkably well in adverse circumstances. Indeed one interviewed boy [aged 11] said that things had remained much as normal at school but he had missed his friends being able to visit him. However, another boy [aged 12] reported having trouble sleeping at night, acknowledged he was being bullied at school, as a result of being in temporary accommodation and had started playing truant as a result.

Being able to keep children attending the same school was recognised by some parents as an important way of 'normalising' the situation for children and reducing the number of changes they would experience in their lives at any one time.

In two situations single mothers reported that their sons missed their fathers. Moreover, they also felt that the lack of a father figure was contributing to their sons indiscipline.

2.6 Parent's health and wellbeing

Recognising the prime importance of parents in supporting the health and wellbeing of their children led the research to also enquire about the effects of homelessness on the health of parents.

Overwhelmingly parents reported suffering depression and stress as a result of being homeless. Several said they had previously or were still taking anti-depressants or sleeping tablets:

I was on anti-depressants for a time. I have only just come off them. I lost a lot of confidence and put on two stones in weight. When in the B&B I couldn't work and wasn't allowed anyone in the room to babysit the children. It has been very difficult to get my confidence back.

(45 year old single mother)

My doctor put me on anti-depressants and referred me to a psychologist. I get so worked up over the hassle and have difficulty sleeping. It has affected how I get on with Sharon [her daughter]. We are both stressed.

(26 year old single mother)

There was an acknowledgement on the part of parents that their stress and depression were likely to impact adversely on children's wellbeing. In several instances parents said they tried to disguise their feelings from children but were also ready to admit that children were likely to see through pretence.

➤ Summary points

General:

- the effects of homelessness on children's wellbeing and education is a complex picture which is difficult to deconstruct. This reinforces the need for partner agencies to work together
- parents highlighted factors such as the age of the child, the nature of temporary accommodation, and their own mental health as factors which could amplify or reduce the effects of homelessness on children's health and education
- keeping children attending the same school was seen as an important way of 'normalising' the situation for children
- many parents reported suffering depression and stress as a result of being homeless.

Temporary bed and breakfast :

- fosters a reliance on fast foods
- makes it difficult for children to study
- exposes families to smoking (in communal areas)
- disrupts sleep patterns (poor sound proofing/anti-social residents).

2.7 Practical proposals

Parents were asked to suggest ways of developing or improving the system to reduce the effects of homelessness on children's education and health as well as their own wellbeing. The main suggestions are summarised below:

- develop a systematic method of communication for all stakeholders. Provide more communication in a written form concerning the services and support available to homeless families
- clarify the situation with respect to the housing allocations policy. Include information on allocations procedure, the role of the homeless officer and the points system
- reduce the levels of uncertainty as far as possible. This is particularly important for those families in temporary hotel or bed and breakfast accommodation, where a few informants suggested that not knowing when you would be rehoused, was worse than having a specified moving date, which was still sometime away in the future
- abolish the use of bed and breakfast accommodation or at least monitor the quality of provision and supervision of accommodation more effectively and consider the mix of clients allocated to particular bed and breakfasts. Make the continued use of bed and breakfast dependent on (effectively monitoring) satisfaction ratings from clients.

CASE STUDY 2

Background

Interview with an adult female. She had been separated from her husband for sometime and had been disabled as a result of industrial accident, subsequently unable to work. Presently living in bed and breakfast accommodation with her 12 year old son. They had moved twice in the last six months.

Present accommodation and situation

The mother was very concerned with her present situation in the B&B. She said:

> *It is inadequate, I am sleeping with my son who is going through puberty and who really should have his own room. There is a lot of disturbance at night in the B&B from other residents, which also makes sleeping difficult. Several of the rooms have been broken into. The place is frightening and unsafe. Some of the other residents have drug related problems. With my disability I should be in a ground floor flat yet my accommodation is up stairs.*

Impact of homelessness situation on education and health

> *My son is well behind at school. There is no room in the B&B for him to study, he can't do homework, I don't know enough to help him with it.*

She reported that her son had been bullied several times at school with most recent episode leaving him with a concussion. Although she said that the school had dealt with the youths involved the experience had left her son very wary of going to school:

> *He is picked on and bullied because of where he stays.*
>
> *He has been playing truant from school.*

She went on to say that her son had lost a lot of friends, pointing out that friends were not allowed to visit him at the B&B. She felt that the school appeared more concerned with her son's truanting than the fact that he was falling badly behind in his studies.

In terms of her son's general health the mother suggested that he was having difficulty sleeping (he was taking sleeping tablets). She also said he was having regular tantrums, had become withdrawn and had actually struck her. She felt he was suffering a lot of stress through staying in the B&B. Moreover she reported that the poor cooking facilities meant a reliance on fast foods which meant they both had relatively poor diets. He was also suspected of having asthma:

> *Limited cooking facilities means having to microwave ready prepared meals, many of these are full of fat. Bad for health and makes trying to lose weight more difficult.*

She pointed out that her doctor had recommended a ground floor. In the B&B she had to climb stairs and she had as a result experienced minor black-outs. Additionally she said that she had developed high blood pressure, believed to be stress and there was also a suggestion of a heart problem. A stomach ulcer was also felt to be exacerbated by their present living situation. She had attempted suicide at Christmas 1999 but was saved by her son. Subsequently she had been prescribed anti-depressants, which she felt were helping her. Mother also reported that she had begun to drink 'quite a bit' of alcohol:

> *We get little peace in the B&B... it is very stressful situation.*

continues

Support

Housing - The mother reported being on the housing list for a long time and felt she was not kept well informed about progress:

> *The Housing Department could keep me better informed of my situation and developments. I have to chase them up for information.*

She felt that she stuck in the system while others moved on. She understood that her requirement for a ground floor flat may slow up her progress. Would appreciate a regular monthly newsletter from housing department.

GP – She said that her GP has been very good, and understood the problems she was experiencing.
CAB – The Citizens Advice Bureau had been helpful in dealing with financial difficulties.
School – She was more critical of the school saying that:

> *My son requires help, the school does not recognise this.*

Suggested improvements

The mother made several relevant comments in addition to pointing out that the most important thing that could be done for her and her son would be a move to suitable accommodation. She felt that better cooking facilities within the B&B would help her and her son to improve their diets. Additionally she wanted teacher/learning support at school for her son to help him catch up in his studies.

3: Research Findings—Professionals

Interviews with professional informants highlighted the interconnectedness of problems and issues associated with being homeless. Many professionals were aware of the 'knock on' effect of homelessness on people's lives and children's lives in particular. This section highlights the main findings which emerged from these discussions.

3.1 Professionals' reactions to homelessness issues

Eleven professionals reported having had direct experience of working with homeless issues or those experiencing homelessness. Of these, five were in housing-related occupations, two were health visitors, one was a social work employee, one was in education, and the other worked for a voluntary agency.

Of the other twelve professionals most reported some experience of homeless issues but no direct experience. There was a strong recognition of the importance of the research and the need to address issues related to social exclusion among all of the respondents.

3.1.1 The impact of homelessness on health and education

For many people the provision of temporary accommodation can represent a safe haven from relationship difficulties and provide much needed shelter for families facing an uncertain future. While this was implicitly acknowledged by several of the informants the majority went on to make comments which highlighted the negative effect of homelessness, and in particular temporary accommodation, on health and education. In most cases informants stressed the 'knock on' effect of homelessness. The following statements are typical:

> *The uncertainty and emotional upset resulting from homelessness can have a detrimental effect on attendance at school and pupils' work.*
>
> (Health visitor)

> *Education is more often than not disrupted when families are housed in emergency accommodation because children have to change schools and are often housed in accommodation lacking adequate play and/or study space.*
>
> (Woman's aid worker)

> *...temporary accommodation, bed and breakfast and inadequate housing in general can have a negative impact on health via such things as dampness and overcrowding.*
>
> (Housing officer)

One community development worker highlighted specific concerns in relation to teenagers and young parents:

> *Mental health issues are prominent. Young people tend to have trouble learning how to cope with their circumstances, finding support,... they tend to suffer from loneliness.*

In another interview, a social worker also spoke of a failure to recognise the needs of homeless young people with particular problems:

[There is] limited provision for disturbed young people and [those with] personal problems, for example, drugs, alcohol, mental health, violence and learning difficulties.

At a more fundamental level one social worker suggested that the effect of homelessness on young people is underestimated going on to state that the needs of children were often seen as secondary to those of adults.

In a few instances interviewees expressed the view that some professionals lacked any understanding or awareness of the nature of homelessness or its impact on peoples lives:

You feel like you'd like to take some professionals to the places where the homeless people are and show them their situation.

(Health visitor)

3.1.2 Appropriateness of accommodation

Specific concerns were raised by informants with regard to the suitability of accommodation that homeless families find themselves in. Temporary accommodation and more specifically bed and breakfast accommodation came in for most criticism:

Everyone wishes there were no bed and breakfasts and that we had more temporary housing. Because B&Bs are privately run they function as a business rather than a service, it should be the other way around.

(Homelessness officer)

There is no kitchen or catering facilities at the [bed and breakfast] hotel so kids miss breakfast and other meals. There are hygiene issues, the bedding is not their own and they have to share toilets and bathrooms. Not everyone who uses the bathroom cares about hygiene. There is a lot of condensation. It is not appropriate for long stay accommodation.

(Assistant headteacher)

Certainly among the housing personnel interviewed there was a general feeling that this type of accommodation was poorly matched to the needs of families, often housing a parent and several children in one room with little in the way of facilities:

Often the same room is shared by a parent, her school aged kids and her partner...it's just not appropriate.

(Assistant headteacher)

One housing officer made the following statement in respect of the impact of bed and breakfast accommodation:

... people are more at risk of injury when housed in B&B accommodation due to its unsuitability and the tendency for overcrowding....the health of the homeless is impacted upon... due to their lack of access to good healthy foods and adequate cooking facilities.

A social worker expressed the view that bed and breakfast does not resolve problems:

Families are housed in temporary accommodation, bed and breakfasts or privately rented accommodation. All of which tend to amplify difficulties or create problems of their own. For instance bed and breakfast accommodation often leads people back to the situation that they had eg a violent home. In addition privately rented accommodation can often

leave families feeling psychologically more vulnerable e.g. the family may have ended up homeless in the first place, due to a landlord deciding to sell.

(Social worker)

Other informants highlighted the educational impact of overcrowded accommodation on children. A number spoke of children in temporary accommodation lacking the space to study and, where space is available, it is often communal, having to be shared with others engaged in activities (eg watching TV) which impair the child's ability to study effectively. In a similar vein, a few informants raised concerns about the sound proofing of temporary accommodation, suggesting that it was sufficiently poor to interfere with both the studying of children and their ability to sleep.

Poor facilities in temporary accommodation were cited by a number of professionals as potentially undermining the health of children and their families. Temporary bed and breakfast accommodation sites can lack catering facilities which forces many families to utilise local fast food outlets. In some instances children may attend school without having had a breakfast:

Temporary accommodation [Bed and breakfast] is often cramped, damp with limited facilities for cooking. This presents real problems in providing appropriate diets for babies and young children. Often families have to eat from chip shops.

(Social worker)

Kids live out of chip shops. There are no catering facilities at the hotel – parents can't cook or make up packed meals for kids to take to school. No cooking is allowed in rooms. One very young child is just living off yoghurts. One family has been in this situation for eight months. There is no fridge other than the main one in the hotel. Parents can't easily access this – especially parents with a baby who needs milk to be stored in a fridge. It has big health implications. Access to drinking water is limited.

(Assistant headteacher)

In a few cases informants spoke of an inappropriate mix of people sharing the same temporary accommodation. Limited availability of accommodation meant that young families were sharing accommodation with elderly people and people with anti-social habits such as drug use and alcoholism. Given the differing needs of such populations it was felt that such mixing was less than desirable. However, there was also acknowledgement among respondents that, given the pressure on the local authority to find sufficient accommodation to house homeless families, reliance on such accommodation would have to continue, at least until East Lothian Council has supplanted the use of bed and breakfast accommodation. This process is, according to the Council's recent homelessness review, to take place over a five-year period.

3.1.3 Isolation

Isolation among homeless families was viewed as a cause for concern by a number of informants. It was seen to be a particular problem for families who were placed either, in an unfamiliar area with few friends or relatives nearby, or in bed and breakfast and hostel accommodation. In such accommodation families were unable to invite friends and relatives into their accommodation. Isolation

was seen to increase the stress of homelessness for families, particularly single parents. Being relocated in another area was also seen as presenting difficulties for some children in that they would be unable to travel to their existing school. However, it is notable that this issue has recently been addressed through joint education and social work funding for transport to allow children to remain at their existing schools while housed outwith the school locality.

3.1.4 Stigmatisation

Several informants suggested that being homeless was often felt to carry a stigma. Generally respondents felt that this could result in parents and/or children attempting to hide the fact of their homelessness from services who may actually be in a position to support them. This situation was felt to further increase family stress and have a detrimental effect on health conditions such as eczema and asthma which in turn was likely to affect children's attendance at school. While a number of informants identified stigmatisation of the homeless as a serious issue with related health and educational impacts, there was some indication that such stigma may be exacerbated by the welfare services themselves. Interviewed homelessness officers suggested that all housing officers could benefit from inservice training which focused on increasing their awareness of homelessness and related issues and which will combat stereotyping and prejudice. Such a process is likely to contribute to the development of a housing service which meets the differing needs of all of its clients. East Lothian's homelessness strategy acknowledges this to some extent having identified the treating of people with respect and dignity as a major aim. In pursuit of this aim, the council has undertaken to publicise and implement a customer care code and a training programme for staff.

➤ Summary points

Professionals:

- understood the complex nature of homelessness and its effects on children's and families health and education
- raised concerns regarding the homeless plight of some young people with specific problems such as: special needs, substance addiction, and/or mental health problems
- highlighted the inability of much temporary bed and breakfast accommodation to meet the needs of families
- regarded isolation of homeless families as a particular area for concern
- identified a need to tackle ignorance of homelessness among other professional groups.

3.2 Improving the system

Much of the discussion with professional informants centred on how to improve the health and educational services for families experiencing homelessness. Increasing the available financial resources was seen as desirable given the long standing lack of investment in local authority housing stock. However, there was also a belief that sufficient funds to reverse the decline in housing were unlikely to be forthcoming. A number of informants suggested that services had to recognise that clients were individuals with individual problems and that there was a greater need to inculcate this ethos among and across services. Relatedly, interagency working was viewed as a key area for development by professionals. Many of the informants clearly recognised the need for a new 'vision' in service provision, grounded in a client-centred approach, involving shared service objectives, with a requirement for improved communication both between the client and relevant agencies, and between the agencies themselves.

3.2.1 Interagency working

The majority of informants agreed that one of the most effective ways to improve services to client groups such as homeless families was through the development of interagency and interdepartmental working. It is noteworthy that such views are in line with East Lothian Council's Homelessness strategy which intends to:

> Set up an Interagency homelessness planning group to develop and evaluate strategies to reduce homelessness (East Lothian Council 2000).

Informants viewed the benefits which could accrue from such working practices as outweighing the disadvantages:

> *Interagency working has the capacity to sort things out if you have a good dialogue with other agencies.*
>
> (Woman's aid worker)

> *Problems can only be solved by working together... You can't just tackle a child's need from a single perspective.*
>
> (Social work officer)

As already mentioned, the sharing of school transportation costs between social work and education departments is a good example of a service improvement grounded in interdepartmental co-operation. This initiative meant that two agencies shared the cost of a scheme which was felt by both departments to be too heavy a burden to finance alone.

Sharing information and resources was seen as a positive development from interagency working, both improving the services' efficiency and their response to client groups:

> *As a school we'd appreciate more information on a family's situation when they are homeless. We will pick up on their situation if educational problems occur or some incident in the school is related to a pupil's homeless situation – like truanting. Otherwise we might not know about what is happening.*
>
> (Assistant headteacher)

One or two informants sounded a cautionary note, suggesting that there would be a requirement for more time to be diverted to planning meetings which could reduce the time available for working directly with clients. Moreover the fear was expressed that departmental boundaries were difficult to overcome and some professionals would resist what would be seen as intrusion into their area of expertise.

Several informants spoke of the need to develop services at the strategic level, based on interagency co-operation, to meet the complex needs of client groups. In this respect informants suggested that there was still a great deal of work to be done. However developments such as the setting up of Social Inclusion Partnerships and the work of the Integrated Assessment Working Group combining social work and housing assessments of vulnerable people was regarded by a few informants as important for fostering strategic developments and encouraging the joint working that such developments would require:

> *A single budget shared between the agencies would certainly help rather than each one controlling its own finances... this would help to co-ordinate one response. What is needed is a Children's Service rather than a combination of different agencies.*
>
> (Social work officer)

Although one or two existing instances of interagency working were cited by informants these usually involved the sharing of information between agencies or referring clients to other services. Most respondents readily admitted that interagency working in East Lothian was at best sporadic:

> *Networking fails, there is little or no notification of needs or incidents concerning homeless kids and families. There has to be greater liaison between agencies to discuss these issues.*
>
> (Assistant headteacher)

> *There is a little interagency work but it is of an ad hoc variety....different departments do not know what each other offer.*
>
> (Community development worker)

One homelessness officer gave an insight into the need for interagency work with her views on the existing situation:

> *More joint working is needed between the Education, Social Work and Housing Authorities involved in each homeless case. Schools never know where the families have moved to or even that they are homeless. Disclosure problems mean that it is hard for the agencies to inter-react. Health visitors are always complaining about the inadequacy of people's housing situations, but there is nothing the housing department can do [in the present circumstances]. The housing department is not always aware of special needs, learning difficulties and mental health problems. They should be advised by social work about any known problems and should also receive training on how to deal with tricky situations. More links are needed with non-government agencies such as the Citizens Advice Bureau. The CAB are doing their best but they don't understand how we work so they often end up referring cases back to us which we have sent to them. There is a need for a much higher level of interagency understanding.*

In a number of instances informants cited examples of poor communication and co-operation between services, the net result being that client groups were left

confused and dissatisfied with the information and service they had received. Several suggested ways to directly tackle the poor lines of communication and misinformation that existed between services. These included:

- developing 'single port of call' contact points (an issue also raised in parent interviews)
- joint training sessions for partner services
- information giving sessions between agencies (sharing roles and remits).

➤ Summary points

Interagency working was seen to:

- promote a client-centred approach with shared agency objectives
- encourage the pooling of resources between different agencies
- develop better communication and understanding between partner agencies
- require to address concerns regarding potential additional workload and unco-operative partner agencies.

3.3 Other improvements

While much of the discussion with professionals was spent on exploring the strengths and weaknesses of interagency work other suggestions concerning practical steps which could be taken to better meet the educational and health needs of children and families experiencing homelessness were also discussed.

3.3.1 Early intervention

Homelessness is likely to be the culmination of a series of life events. Several informants, recognising this, suggested a need for earlier intervention with families and individuals before they become homeless:

> *Avoiding homelessness to begin with is the issue here; we need to work out a good system of prevention, the reasons behind becoming homeless need to become a focus; we need to address the issues which are brought up by the homeless people and start with the practical problems.*
>
> (Health promotions officer)

> *Prevention is one of the most important ways to improve the situation. People often are not aware of their rights (e.g. private tenants can be told to leave and may not realise what rights they may have to stay). Similarly they don't know where to get financial advice and it is especially important to help owner-occupiers to understand the various financial options available.*
>
> (Homelessness officer)

A few informants highlighted a specific role for education in helping to prevent some of the difficulties which are faced by young people moving into their own accommodation. For example:

> *There is a need for educating young people who are about to move away from home. They need a better idea of what is involved with having a house, many are just not prepared enough.*
>
> (Housing officer)

> *Social education should be built into the curriculum.*
>
> (Community development officer)

> *Young people and adults should have access to basic DIY education eg wiring a plug. An example of such a project is the Edinburgh Home Maker Project.*
>
> (Community development worker)

Another suggestion involved a programme of consulting school leavers and developing services more in tune with their needs. Developing services which are more focused on prevention and early intervention will represent a major challenge for partner agencies since such an approach would require greater co-operation and planning between services than is likely to exist at present. In this it is noteable that East Lothian Council in its Homelessness Review (East Lothian Council 2000) has identified as a specific aim:

> To develop strategies to prevent homelessness arising across all groups of people but particularly the most vulnerable.

3.3.2 Reducing time in the system

While intervention strategies aimed at reducing the number of families presenting as homeless is one area for development, another concerns reducing the time families spend in temporary accommodation:

> *It is important to make the passage of homelessness as quickly as possible, the longer someone is in the system, the more effect it has on them.*
>
> (Health promotion specialist)

Most informants who suggested this did so on the grounds that the health and educational implications for children were likely to increase the longer they spent in temporary accommodation. This view is supported by evidence from parental interviews. One suggestion made by a housing officer was to encourage people to make the authorities aware of their impending homelessness as soon as possible. Since points for rehousing are allocated on a daily basis the client will be credited for the time that they are still in accommodation thus reducing their waiting time when they become officially homeless. One informant indicated having experience of a neighbouring local authority where clients in such a position were turned away from housing offices and told only to return when they were actually homeless. This informant felt such practice was unacceptable.

3.3.3 Providing information and keeping in touch

Periods of homelessness are associated with increased anxiety and stress heightened by uncertainty about the future. More than half of the informants indicated a need to provide more information, particularly in written form, to clients experiencing homelessness. Given that interviews with housing and

homelessness officers tend to take place at crisis points when clients are unlikely to be able to retain substantial amounts of oral information it was suggested by just over half of the informants that more written information should be produced for clients. Such written material could include information on the different welfare services, contact numbers and addresses:

> *While viewing possible accommodation clients could be provided with an information sheet highlighting the location of schools, health centres and so forth, alongside contact names etc. We could make it easier for clients to get information and thus to access whatever facilities are at hand.*
>
> (Housing officer)

> *Homeless people often have a limited knowledge about the range of services that can help. An accessible information pack on useful services and support for people who are affected by homelessness might help.*
>
> (Health visitor)

Developing a system for keeping clients informed of their progress on the housing list was also seen as useful in reducing the stress associated with not knowing when one would be rehoused. One homelessness officer pointed out that being able to guarantee a maximum period of stay in temporary accommodation would probably help clients cope with the situation:

> *...a major reason for not coping is they have no control over what is happening to them.*

Recent changes in the homelessness officers' remit in East Lothian now means that they remain in contact with clients after they have been rehoused (previously contact was severed after rehousing). Homelessness officers reported that this was a useful development, allowing them to 'tie up loose ends' and provide further advice. Given that some interviewed parents reported that they had built up good relationships with their homelessness officer, and that many homeless feel very isolated, then this is a welcome development. On a similar note, one respondent suggested that many children who experienced homelessness should have counselling services available to them both during their stay in temporary accommodation and for some time after they have been rehoused. Another informant suggested that:

> *[Allocating] a support worker for kids when [a] family is placed in temporary accommodation would help. The needs of the kids would be better monitored.*
>
> (Assistant headteacher)

3.3.4 Allocating appropriate accommodation

As previously noted, a number of informants raised concerns about the suitability of temporary accommodation particularly for families with children. Several informants particularly those with a background in housing said that they required to replace current bed and breakfast temporary accommodation with purpose built local authority provision. However given the restrictions on resources this was more likely to be a long-term aim rather than something which could be undertaken in the short term. One respondent suggested that temporary houses should only be given to those with experience of running a household while hostel and bed and breakfast accommodation should be

reserved for those with no experience of running their own household i.e. not families. It was also suggested that support in the form of a residential officer should be put into temporary accommodation used primarily by young people.

➤ Summary points

Professionals suggested:

- developing early intervention strategies, with a focus on educating young people, to reduce the incidence of homelessness
- reducing the time spent in temporary accommodation to minimise the impact of homelessness on children and parents
- developing better systems of communicating with homeless clients to keep them informed of developments and reduce uncertainty
- reducing and ultimately removing the dependence on bed and breakfast accommodation which is particularly unsuitable for the needs of families.

3.3.5 Other suggestions

A number of additional developments were suggested by professional informants. These included:

- providing a mobile health bus
- providing childcare to allow parents to return to work
- involving young people in developing information packs for the homeless
- developing a housing strategy based on research
- developing an advocate service for supporting homeless people.

The Tranent SIP alongside the housing division has for some time been supporting an initiative involving young people in developing a pack for young homeless people. The finished material will be made available to all young people of secondary school age in East Lothian.

CASE STUDY 3

Background
Interview conducted with an 11 year old girl who had been living with her mother and younger sister in permanent local authority rented accommodation since the beginning of January 2000. The family became homeless as a result of marital break-up. She had experienced three house moves in eight months, and had just spent some time living in B&B accommodation.

Present accommodation and situation
The girl was clearly very positive about the family's move into their new accommodation, stating that things were:

> *Better than Edinburgh,... the people here are nicer, it's tidier and there is less litter. I used to get slagged at my old school but now I've got good friends.*

Impact of homelessness situation on education and health
The girl's recalled experience of staying in bed and breakfast accommodation was predominately negative. She reported being unhappy in that she could not tell anyone where she was staying, was unable to have friends over to visit, and was frightened that other children at her school would find out where she was staying and make fun of her. She said it was difficult to keep the fact that she was homeless and staying in a bed and breakfast a secret. She also reported feeling:

> *Jumpy and scared that we wouldn't get a real house and that dad would find us.*

In both the bed and breakfast and other temporary accommodation she said that:

> *I felt sick a lot of the time and I used to cry all the time. I had trouble sleeping during the night and I used to have nightmares. Now that we're staying here I'm happier and settled.*

The child also spoke about her mother saying that:

> *Mum cried every night. She was ill! Mum was worried because she didn't know about what house she was going to get. This house is the best thing that ever happened to mum.*

Suggested improvements
The girl made several points in relation to what would have made things better for her and her family:

> *If we didn't have to stay in the B&B.*
>
> *You should be able to look at the B&B first.*
>
> *You should have a choice.*

CASE STUDY 4

Background
Interview with a single father, who has lived with his 12 year old son in permanent local authority accommodation since April 2000. They became homeless as a result of marital break-up and subsequently experienced six house moves in eight years. He said that until recently he was unaware of the fact that he could have received extra points as a result of his son's health problems. Once he realised this and reported the situation to the housing department he gained sufficient extra points to move into his present accommodation.

Present accommodation and situation
The father reported being very pleased with his present accommodation:

> *It's very good, ideal for two, I've landed on my feet.*

Impact of homelessness situation on education and health
Father said that during the period of homelessness he managed to keep his son at the same school. He suggested that things would have been much worse for the boy had he been unable to do this. The school had been helpful when he explained to them about his situation and they made provision for his son to arrive early at school (to allow the father to keep on a full-time job). Father did say that during their stay in bed and breakfast accommodation his son had begun wetting the bed and he had noticed that the boy's asthma had worsened.

Father also highlighted the difficulty of being a single parent, trying to care for his son at home and hold down a full-time job (which involved shift work) at the same time.

Support
Homelessness Officer – The father's comments regarding his experience of homelessness officers were positive:

> *[They were] very helpful, made good arrangements for B&B, sorted out house appointment and the necessary formalities with the council, arranged for present house decorating and checked with me that it was up to standard.*

Other Council Housing employees – his comments in relation to other council employees were less complementary. He claimed that he had been made a promise by council employees which had not been fulfilled, leading to homelessness:

> *I was told eight years ago that if I signed the tenancy to my wife [client originally had joint local authority tenancy with wife] they [the council] would get me a new council house but this did not happen.*

He also suggested that whilst they were in privately rented accommodation there was often a delay in the council paying the rent. He said that he had completed the necessary paperwork for a rent rebate but the process was fraught with delays which had made his relationship with the landlord very difficult at times.

Suggested improvements
The interviewee suggested a need for the points allocation system to be more transparent.

4: Recommendations

Homelessness is not just a housing problem and the only solution to the problems presented by homeless households is not always just the offer of a house. As stated in the introduction, the reasons why people become homeless are many and complex in their make-up. Where dependent children are concerned the factors become even more difficult and in need of urgent resolution. The resources to effectively resolve the issues once and for all are not available. Homelessness and long 'waiting lists' for council and other forms of rented housing, are factors of housing shortage. In terms of expressed need there are seven or eight households for every house that becomes available from council stock in East Lothian. Many others simply don't apply. In the face of such circumstances strategies have to be developed to enable best use of the resources and services which already exist. Priorities have to be continually evaluated and re-evaluated. As has been stated elsewhere in this report, East Lothian Council has already carried out a review of its homelessness service from which a strategy has been drawn up, setting out a series of objectives to be met over the next few years. One of these concerns the provision of temporary accommodation for homeless households, particularly families, and the authority's use of bed and breakfast accommodation. As far as the latter is concerned, the council would like to phase it out altogether over the next five years to be replaced by purpose built, self-contained accommodation providing as near as possible 'normal' living conditions for the households which have to use it. Given the steady rise in homelessness levels nationally this represents an ambitious aim which, if successful, would go a long way in making a difficult and stressful experience easier to bear. In itself however, it would not be enough to address all the issues identified in this piece of research relating as they do to factors which go beyond purely physical shelter.

The researchers, as set out in Chapter 1, were charged with making recommendations in line with the aims of the research. This task has to some extent been simplified as a result of the congruence of the interview material from professionals and that from clients. There was a great deal of agreement on the educational and health implications for children from the experience of homelessness.

The key themes which emerge from interviews with professionals are the following:

- Communication (and communication and communication!)
- Information
- Intervention
- Family/child — centred approach
- Prevention
- Contact (pro-active rather than just responsive)
- Support
- Multi-agency working
- Planning
- Monitoring and reviewing practice

The issues (challenges) which emerge are:

- Poverty
- Exclusion
- Powerlessness
- Lack of choice
- Lack of control
- Mental illness
- Stress
- Unemployment
- Isolation
- Departmentalism
- Prejudice
- Service-centred approach
- Demarcation of functions
- Resources

Any recommendations should ideally address the issues/challenges while incorporating the themes which the groups kept coming back to. The suggestions below are put forward for discussion as an attempt to do this while recognising the detail and logistics are for practitioners to sort out.

4.1 Joint agency working

Much documentation and research has stressed that homelessness is not just a housing problem. Homelessness is likely to be the culmination of several pre-existing problems. No one statutory or voluntary agency is likely to possess the necessary skills and resources to tackle all the problems faced by such children and their families. Housing, Social Work, Education, Health Trust and Health Board have to find ways of working together to ensure the needs of families and individuals do not fall through the net.

In practice this could comprise:

- a review of current formal and informal arrangements and referral systems of voluntary and public sources to make sure the client's needs are quickly and effectively met
- operational working parties or task forces to establish where and how joint agency working might be organised to pick up different facets of homelessness. For example, education, social work and health are the agencies most involved with children in homeless families
- joint training and briefing of those public and voluntary agencies who are working together
- a forward action plan to be implemented, monitored and evaluated over the next two years.

4.1.1 Develop a client and child centred approach

It was apparent from the research that there is no such thing as a typical homeless family. Each had a story to tell and each had encountered a unique set

of problems. In terms of the impact of homelessness on children's education and health it was apparent that in some instances this was acute and often immediate while for others it was more gradual, delayed or less obvious. To effectively tackle the range of difficulties faced by children and their families requires a service which focuses on the needs of the client and deploys resources and services tailored to meet these needs.

In practice this could comprise:

- examining structural and cultural details to moving from a service-centred to a client-led approach
- establishing how to co-ordinate contacts with families
- consultation with families about their overall needs
- development of a family care study strategy.

4.1.2 Intervention and preventative strategies

A major challenge is to break the cycle of crises. How can the agencies co-operate to support, advise and assist children and their families who are or who could become homeless?

In practice this requires agencies to agree a strategy to identify the likelihood of a crisis and a means of acting in a co-ordinated, pro-active way to avoid it. In particular such action could be built into procedures at the point of resettlement, whether in temporary or permanent accommodation. Essential features of this strategy are clearly defined roles for care management and clarification of linkages between agencies.

4.1.3 More comprehensive information for homeless families

Homelessness is characterised by insecurity, uncertainty and isolation. There would appear to be a need to draw together information on a wide range of services and make this available to families experiencing homelessness.

In practice families could be provided with a multi-agency information pack comprising:

- assessment procedures and possible outcomes
- local facilities and services - who to contact for what and how
- local information about shops, schools, amenities, transport, playgroups etc.

4.1.4 Keep in touch with clients

Homelessness means an increased likelihood of children and their families experiencing isolation and stress. While homelessness officers do appear to keep in touch with clients, there is a need to systematise this to ensure that all clients receive regular updates of information on their situation. In practice, a brief newsletter may be one idea for keeping in regular contact with clients, while regular telephone contact or home visits may be another. As part of its housing strategy, East Lothian has undertaken to keep all of its clients residing in

temporary accommodation, regularly updated on their housing application progress. No person should now go more than two weeks without being contacted by a homelessness officer. Indeed each temporary accommodation unit will also have a designated housing officer responsible for liaison with residents.

4.1.5 Establish a child information and support helpline

Children experiencing homelessness potentially suffer in silence. They may worry about their parents or their own health but given the situation may not want to burden parents with their concerns. Fears over stigmatisation or bullying may discourage disclosure at school. Clearly the housing service will need to develop effective partnerships with health, education and social work services if they are to effectively tackle these issues.

East Lothian Council may wish to consider a multi-agency child helpline as one way of supporting these children.

4.1.6 An effective client monitoring system across all relevant services

There is a need to develop a more pro-active client monitoring system. While the housing department already operates a monitoring procedure which seeks feedback from clients as they move into permanent accommodation it was apparent that this was ineffective in addressing many problems which can and do arise during families' periods in homeless accommodation. Monitoring and evaluation should permeate all stages and parts of the system if it is to successfully meet the needs of homeless people.

In practice this means:

- establishing firmer monitoring systems in terms of client contacts, liaison procedures, local protocols and outreach work and any other aspects of homeless client services
- having a regular review cycle drawing on evaluations of how the system overall is meeting the needs of clients.

4.1.7 An inter-agency training and staff development programme

The suggestions outlined above are likely to require some culture changes within and across the various agencies concerned with homeless families. A joint agency approach to homelessness will require rethinking modes of working and increasing mutual understanding and appreciation of service boundaries.

In practice this will entail the development of an inter-agency staff training programme that:

- provides information about legislation and associated procedures
- attacks stereotyping and prejudice
- clarifies how to access services
- provides a forum for discussing matters of common interest — such as confidentiality issues.

Appendices

A1: East Lothian Council:
Guidance for homeless applicants

A2: Table 1 – Parental informants
Table 2 – Child informants
Table 3 – Professional informants

A3: Steering group members

Appendix 1: Guidance for Homeless Applicants

Please read this leaflet carefully. The information it contains will help you to understand the process by which your application will be assessed and decided. However, do not only rely on this leaflet if you have any concerns or questions which you want to ask. The Homelessness and Advice Officer dealing with your application will be happy to answer any enquiries which you may wish to make. **DO NOT BE AFRAID TO ASK.**

Are you Homeless?

All Local Councils in Scotland, when dealing with homelessness applications must act in accordance with Part 2 of the Housing (Scotland) Act, 1987. This is the law which sets out the powers and duties of councils in responding to people seeking help because they are homeless or are threatened with homelessness. This last point is important. **You do not have to be actually homeless before seeking help.** In fact the earlier you ask for help the better as the council may be able to prevent you becoming homeless in the first place.

To qualify for permanent re-housing by the council, you have to satisfy certain conditions. These are:

1. You must be homeless or threatened with homelessness **as defined by the law.**
2. You must be in **priority need.**
3. You must not be homeless or threatened with homelessness **intentionally.**
4. You must have a **local connection** with East Lothian.

To be homeless, or threatened with homelessness as defined by the law, you must have no accommodation in which you are entitled to live **OR** it is not reasonable for you and your household to continue to live there. To give an example. If you live in rented accommodation and your landlord is threatening to evict you but has not taken the proper legal process, you are still entitled to live in that accommodation. In such an event you would seek advice on your legal rights. 'Reasonable' accommodation is property which is safe and secure, in a good state or repair (or at least is repairable), presents no risk to health and meets the requirements of all the members of the household in terms of access and standard amenities.

Priority Need. This term applies in a number of different ways

The applicant:

i) where the applicant for housing is aged 16 or 17 and regarded as vulnerable on the basis of their young age and having no settled or secure place to live;

ii) where the applicant is aged 16-20 and has been 'looked after' (residential care or social work supervision) at school leaving age or after.

The household: anyone, including the applicant, who:

i) is aged 60 years or older;

ii) is pregnant;

iii) has dependent children (normally up to 16 years but older if in full-time education);

iv) has 'special needs' — physical or learning disability, mental illness or any other condition likely to make them particularly vulnerable (at risk) if not securely housed;

v) where there are other, exceptional or particular, reasons which should be taken into account.

Where **none** of the above reasons apply, the council has **no** legal obligation to provide **permanent** re-housing. However there is a duty to provide you with assistance to find accommodation from another provider. This could be from a private landlord or a Housing Association. While this assistance is being given, you will be entitled to temporary accommodation for a short period — not likely to be longer than 28 days (see below). There is no guarantee that other accommodation will be found as, unlike the council, private landlords and Housing Associations have no *legal* obligations towards homeless people.

Intentionally or Unintentionally Homeless:
In terms of the law, the council is only obliged to offer permanent re-housing to households which are **unintentionally** homeless. That is, the applicant, or members of the household, have become homeless through no fault of their own or as a result of circumstances beyond their control.

Intentional homelessness *might* apply where it is considered that the applicant, or a member of the household, were responsible for their own homelessness by **deliberately** acting in a way likely to result in losing their accommodation. Households evicted from accommodation for rent arrears or anti-social behaviour *might* be considered intentionally homeless. People giving up secure accommodation without giving any thought to where they might live next or taking any reasonable steps to find accommodation for themselves *might* also be regarded as intentionally homeless. A **failure** to act in a reasonable way to prevent loss of accommodation *might* also be regarded as intentional. An example here would be failing to respond to a landlord's notice to evict if rent arrears were not paid off.

Before a decision is made whether anyone is intentionally homeless or not, a thorough investigation is carried out into all the circumstances concerned. No judgements or assumptions of personal responsibility are made in advance of these enquiries. Applicant's own explanations of events are always taken into consideration as well as the often stressful and confusing circumstances that result in homelessness occurring. It is important that applicants co-operate fully with this part of the assessment of their application to allow a speedy decision to be made.
Having a **local connection** means that you have lived in East Lothian for a reasonable period of time or have close family ties with the area and have a good reason to move here. Family members include parents, children, brothers or sisters whose normal place of residence is East Lothian. Otherwise you might have a job here, be actively seeking employment or taking a course of study. Other circumstances, relating to personal safety or health and welfare, will be considered on their merits. In the event of there being no valid local connection, the application is referred to the last local authority where there was or is one. Temporary accommodation will be provided in the meantime.

Summary
All of the above conditions have to be met before the council is legally obliged to accept your application. This means, in practice, that you might be homeless as defined by the law, but not in priority **or** regarded as intentionally homeless or have no local connection. In either of these cases permanent re-housing would not be obligatory on the part of the council, but there would be a duty to provide assistance.

The Homelessness Assessment
Your application will be assessed by a Homelessness and Advice Officer, who will be your main contact throughout the time it takes to carry out all necessary enquiries on your behalf. We try to complete enquiries and make a decision within 28 days

but this may not always be possible. Where appropriate, temporary accommodation will be provided.

The assessment consists of establishing how the situation you find yourself in came about and whether or not you meet all the conditions described above. The purpose of the assessment is not to "catch you out", but to build the best case possible on which to provide you with help in solving your housing problems. This may involve asking you for sensitive and personal information but nothing will be asked which has no bearing on your homeless situation. The information you provide is regarded as highly confidential and will not be passed on to others outside the homelessness team without your permission. Documentary evidence or statements from other people to support your case may be asked for. It is important you co-operate as fully as you can with this assessment so that a decision can be reached as soon as possible. If you have any concerns with the process you should discuss these with the officer dealing with your case. Staff fully appreciate the stress, worries and, often, confusion people who are homeless will naturally feel and you will be given the time to gather your thoughts and state your case. You will also be provided with information to where you can seek independent advice and assistance to present your application. Any decision will be given to you in writing and you have the right to appeal should you wish to do so.

Temporary Accommodation

While your application is being assessed, you might be entitled to temporary accommodation. This will occur if you or any members of your household are assessed as vulnerable and you have no access to other accommodation that you can stay in meantime.

East Lothian Council has three kinds of temporary accommodation. These are:

1. Ordinary housing stock which will be wholly or partly furnished and vary in size in terms of number of bedrooms;
2. Bed and breakfast accommodation. These are privately run hotels or guest houses which provide single rooms along with shared facilities such as kitchen and bathrooms;
3. Supported accommodation for young single homeless people.

As far as possible, the council will try to avoid accommodating families with children and single young people in bed and breakfast establishments. However this is not always possible if the other kinds of accommodation are full.

All these properties are regularly inspected and the council has developed standards with which we expect the providers to comply. However, should you have any concerns about the accommodation whatsoever you should contact the homelessness officer dealing with your case and let them know.

Moving On from Temporary Accommodation

Should it be decided that the council has an obligation to house you, you will remain in the temporary accommodation until a permanent offer of housing can be made. This may take some time so it is important that you let the council know of any concerns you might have about this arrangement. Staying in temporary accommodation may involve informing other people of your whereabouts or have effects on children's schooling, access to medical services, travelling to work or collecting benefits. You should discuss these matters with the homelessness officer and inform them of any particular difficulties you might be experiencing.

If you are not accepted as homeless or in priority or found to be homeless intentionally, you will be given notice to leave the temporary accommodation.

The homelessness officer will provide you with whatever assistance they can to help you find other accommodation, but the council itself will not be able to offer you a permanent tenancy. If, within a reasonable period of time, you still have nowhere to live you will have to leave the temporary accommodation and make whatever alternative arrangements you can. Following that you should report any changes in your circumstances which might have an influence on your chances of being housed and ensure that all relevant information is contained on your application for housing.

Permanent Re-housing

In the event of your application as homeless being accepted by the council you will be given **one reasonable offer** of accommodation. By this time you will have been asked to choose the areas in which you would be prepared to live, including at least one main town other than North Berwick. Your offer of accommodation will reflect your choice of areas although not necessarily a precise location within that area. For instance, if you choose Haddington then the house offered could be any place within Haddington.

Every effort will be made to provide accommodation which matches your and your households needs, but at any one time choices will be limited. Relevant social and medical factors, along with any special needs, will be taken into consideration in making you an offer. Should you refuse then, subject to appeal, the council will have met its obligation under the law and you will be required to leave your temporary accommodation if you had any and make your own arrangements.

Advice and Information

In the event of you not being accepted as homeless or not in priority need, the council will do whatever it can to assist you find alternative accommodation in the area, this will involve a detailed assessment of your housing needs, exploring all the available housing provision there is, making sure of applications to all the appropriate housing providers, arranging interviews etc. It may not be possible to find permanent housing in the time involved, but every effort will be made to give positive assistance. Regular contact should be kept up to note any change in circumstances or opportunities which might become available.

Appeals

If you are unhappy at the decision made on your application, or concerned about how your application was assessed then you can lodge an appeal for the case to be reconsidered.

In the first instance you would appeal in writing to the Service Manager of the Homelessness and Advice Service at 6-8 Lodge Street, Haddington. Your application would then be reconsidered and a reply sent to you within two weeks. If still not satisfied then a further appeal can be lodged to be considered by a panel of elected members, whose decision would be final as far as the council was concerned. However, you would still have the right to pursue the matter through the courts by way of a judicial review.

Complaints

Regardless of the outcome, should you feel unhappy with the manner in which your application was dealt with or the attitude of staff at any stage you can register a complaint in writing or though the council's 'Feedback' system. Forms are available through staff or at the reception desk of area offices.

Table 1 — Parental Informants

Interview No.	Sex	Age	Children/children's health problems	Status	Employment/ Education	Present housing situ	Area
1	Female	48	Girl aged 12, Sleep disorder emotional problems and suspected asthma	Single/ separated	Disabled, unable to work	Bed and Breakfast	Haddington
2	Female	28	2 boys aged 9 and 5	Single/ separated	Unemployed	Bed and Breakfast	Haddington
3	Female	26	Girl aged 9	Single	Unemployed	Private rented	Athelstaneford
4	Female	36	Boy aged 3, asthma	Single/ separated	Employed full time	Local authority tenancy	Prestonpans
5	Female	43	Girl aged 17, boy aged 15	Single/ divorced	Employed full time	Local authority tenancy	Musselburgh
6	Female	24	2 girls aged 5 and 3, boy aged 1	Single/separated	Unemployed	Temporary unit	Haddington
7	Male/ female	39/38	Girl aged 6	Married couple	Unemployed	Housing Association tenancy	Port Seaton
8	Female	35	3 girls aged 15, 10, 2 months, 2 boys aged 11 (asthma) and 8	Single/ separated	Employed full time, maternity leave	Local authority tenancy	Haddington
9	Female/ male	20/22	2 boys aged 2 and 7 weeks	Married couple	Unemployed	Local authority tenancy	Dunbar
10	Female	45	2 girls aged 11 and 5	Single/separated	Unemployed	Local authority tenancy	Musselburgh
11	Female	21	Girl aged 17 months	Single	Unemployed	Local authority tenancy	Musselburgh
12	Female	17	Girl aged 2	Single	Unemployed	Privately rented	Musselburgh

13	Female	29	2 boys aged 8 and 4	Single/ separated	Employed full time	Local authority tenancy	Tranent
14	Female	32	2 boys aged 4 and 2	Widowed	Unemployed	Temporary unit	Dunbar
15	Female	32	2 boys aged 7 and 4	Single/separated	Unemployed	Private rented	Dunbar
16	Female	41	2 boys aged 15 and 10	Single/ separated	Employed part time, and at college	Moving to bed and breakfast	Musselburgh
17	Male	40	1 boy aged 8, (asthmatic)	Single/ separated	Employed full time	Local authority tenancy	Prestonpans

Table 2 — Child informants

Interview No.	Sex	Age
1 (parental interview 3)	Girl	9
2 (parental interview 10)	Girl	11
3 (parental interview 1)	Boy	12
4 (parental interview 8)	2 boys 1 girl	Boys 11 and 8, girl 10
5 (parental interview 16)	2 boys	15 and 10

Table 3 — Professional Informants

Interview No	Organisation/ agency	Position
1	East Lothian Housing Dept	Principal Housing Officer
2	East Lothian Housing Dept	Senior Housing Officer
3	East Lothian Housing Dept	Homelessness and Advice Officer
4	East Lothian Housing Dept	Homelessness and Advice Officer
5	East Lothian Housing Dept	Housing Officer
6	Education: Pupil support	Principal Officer
7	Education: Pupil support	Officer
8	Education: Pupil support	Officer
9	Education: schools	Assistant Headteacher
10	Lothian Health Board	Health Promotions Specialist
11	Lothian Primary Care Trust East Lothian Division	Health Visitor
12	Lothian Primary Care Trust East Lothian Division	Health Visitor
13	East Lothian Social Work Dept	Senior Officer
14	East Lothian Social Work Dept	Supported Accommodation Officer
15	East Lothian Social Work Dept	Children's Centre Manager
16	East Lothian Social Work Dept	Practice Team Manager
17	Community Development	Comm. Development Officer
18	Community Development	Comm. Development Officer
19	East Lothian policy development	Senior Officer
20	Tranent SIP	Manager
21	Women's Aid	Co-ordinator
22	Shelter	Area Manager
23	Citizens Advice Bureau	Manager

Appendix 3: Steering Group Members

Shannon Bigham
Manager, Pupil Support
Education and Community Services

Richard Campbell
Policy and Planning Officer
Social Work and Housing Department

Ray Chambers
Area Manager
Tranent Community Housing Office

Louise Cormack
Homelessness and Advice Officer
Social Work and Housing Department

Brian Duncan
Policy Development Officer
Business and Policy Unit

Ginnie Moreton
Lothian Health Board
Lothian Primary Care Trust
East Lothian Division

Mike Nolan (Chair)
Principal Service Development Officer
Social Work and Housing Department

Lorraine Porteous
Health Visitor
Health Promotion Department

Joe Ryan
Tranent Social Inclusion Partnership

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